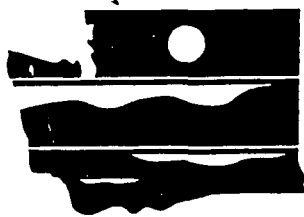


S. F. No. 7356—OS—(Rev. 4-71).



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: _____

AGA507

501

RECORD VERIFICATION (check ☒ one)

☒

Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)

☐

Verification inconclusive

☐

Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name ALDER ST H₂O SYSTEM

Last Name _____

00988-B

Street Address _____

City _____

State _____

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

BETWEEN

373

Well Address 363 ALDER ST

City _____

County _____

T _____

N

R

WM Sec _____

1/4 of the _____

FOR AGENCY USE ONLY

Latitude N 48° 13 484'

Longitude W 122° 31 921'

☒
☐
☐
☐

GPS

Topographic Map

Survey

Computer generated

☐
☐
☐

Digital Altimeter

Topographic Map

Other _____

Elevation at land surface _____ feet/meters (circle one)

Additional information, if available

☐

Location marked on topographic map (please attach)

☐

Location marked on air photo (please attach)

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Physical Description of well (size of casing type of well housing etc)

6" well casing, TNC WELL (?) may be residential), small brown wooden building w/ pump inside / cinder bottom

Location of Well Identification Tag

on well casing

Was supplemental tag needed for ease of identifying well?

☐

Yes

☒

No

If yes where was tag placed?

D	C	B	A
E	F	G	H
M	L	K	J
N	P	Q	R

Scale 1 24 000 (1' = 2,000)

Indicate the location of the well within the Section by drawing a dot at that point

SECTION 3413

COMMENTS THERE ARE A FEW WELLS IN THE AREA -

ACTUAL LOCATION OF THIS WELL IS SPECIFICALLY

AT THE ADDRESS NOTED

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Water Right # _____

Date Issued _____

Circle One

Application

Permit

Certificate

Claim

Exempt